



September 18, 2012

Health Care Reform Implementation Council

Re: Comments on the Illinois Essential Health Benefits benchmark plan selection

The four Illinois **Easter Seals** affiliates appreciate this opportunity to comment on the Illinois Essential Health Benefits (EHB) benchmark plan selection facing the governor by the end of September.

Easter Seals is dedicated to helping people with disabilities and their families to be healthy, functional, live as independently as possible, and participate fully in their communities. We provide rehabilitative and habilitative services to thousands of children and adults every week through occupational, physical, speech/language, and feeding therapies, and many other services for those with highly specialized needs. Easter Seals is the largest provider of direct services for children with autism in the state, and is one of the largest providers of Early Intervention services for children aged birth to three with developmental delays or disabilities.

Steven R. Thompson
President & CEO

Our organizations and those we serve have special concern that rehabilitative and habilitative services and devices are equitably included in the benchmark plan. The importance difference between rehabilitation and habilitation services is *habilitation* services are provided in order for a person to **attain**, maintain or prevent deterioration of a skill or function never learned or acquired due to a disabling condition. *Rehabilitation* services are provided to help a person **regain**, maintain or prevent deterioration of a skill that has been acquired but then lost or impaired due to an illness, injury, or disabling condition. Easter Seals is a significant provider of both habilitative and rehabilitative services across Illinois.

Our specific concerns are detailed below:

- Coverage of habilitative services and devices should be at least in parity with rehabilitative coverage. Regardless of the diagnosis that leads to a functional deficit in an individual, the coverage and medical necessity determinations for rehabilitative and habilitative services and devices should be based on clinical judgments of the effectiveness of the therapy, service, or device to address the deficit.
- Limitations in benefits of any kind (number permitted or types of therapy visits) should be based on the best available evidence and such decisions should be made by professionals with sufficient knowledge and expertise with rehabilitative and habilitative fields to render informed decisions.

Peoria Center

507 E. Armstrong Ave.
Peoria, IL 61603
309.686.1177 phone
309.686.7722 fax

Bloomington Center

2404 East Empire Street
Bloomington, IL 61704
309.663.8275 phone
309.662.7872 fax

**Timber Pointe
Outdoor Center**

20 Timber Pointe Lane
Hudson, IL 61748
309.365.8021 phone
309.365.8934 fax

- Meaningful access to habilitative and rehabilitative services for young children with benefits commensurate with effective treatment is an investment into the long-term health care of children and helps ensure their maximum independence. Limited access is counterproductive. The preferred plan should provide a minimum of 60 visits per year per discipline (physical, occupational, speech/language, feeding therapies, etc.) with a minimum of 20 additional visits for speech therapy inclusive of a procedure to request additional sessions based upon medical necessity.
- Illinois has mandated services for children with autism and habilitation services for children with congenital, genetic, or early acquired disorders—these mandates should be included in the EHB benchmark plan selected for the state.
- Effective communication is essential for maximum independence—audiology services and assistive technology for improved speech and hearing should be included for children and adults.
- Behavioral health must not be neglected—essential counseling and social work services covering children and adults should be included in the EHB plan.
- Rates of reimbursement for all rehabilitative and habilitative services remain far below fully-burdened cost of service. Rates must be increased and payments received within 60 days of service.

Thank you for this opportunity to address these concerns as health care reform implementation continues in Illinois.

Debra Condotti
President and CEO
Easter Seals Joliet Region

Theresa Forthofer
President and CEO
Easter Seals DuPage & Fox Valley Region

Steven Thompson
President and CEO
Easter Seals Peoria-Bloomington

Barbara Zawacki
COO
Easter Seals Metropolitan Chicago

Submitted on behalf of the above by:



Jim Runyon
Director of Grants and Governmental Affairs
Easter Seals Peoria-Bloomington